

Fill in this information to identify the case:Debtor name TGM Coatings, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 22-00304

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ *Amended Schedule* A/B-H
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 27, 2022**X /s/ Kevin Kyle**

Signature of individual signing on behalf of debtor

Kevin Kyle

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**
☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **249,439.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **249,439.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **6,218,025.28****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **33,268.01****4. Total liabilities**Lines 2 + 3a + 3b \$ **6,251,293.29**

Fill in this information to identify the case:Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**
☒ Check if this is an amended filing
Official Form 206A/B**Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☒ No. Go to Part 2.
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments**6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:	3,450.00	-	0.00	=	\$3,450.00
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$3,450.00**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

Debtor **TGM Coatings, LLC**

Name

Case number (If known) **22-00304**

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Powder		\$52,543.00	FMV	\$52,543.00

20. Work in progress

21. Finished goods, including goods held for resale

22. Other inventory or supplies

23. Total of Part 5.

\$52,543.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value

Valuation method

Current Value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
- ☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			

Debtor **TGM Coatings, LLC**
NameCase number (If known) **22-00304**49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)****Machinery & Equipment
(See Attached)****\$193,446.00****FMV****\$193,446.00**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$193,446.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property****54. Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**☒ No. Go to Part 11.☐ Yes Fill in the information below.**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **TGM Coatings, LLC**
NameCase number (If known) **22-00304****Part 12: Summary****In Part 12 copy all of the totals from the earlier parts of the form**

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$3,450.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$52,543.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$193,446.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$249,439.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$249,439.00

Fill in this information to identify the case:

Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**
☒ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Bank of America Creditor's Name 2600 West Big Beaver Rd Troy, MI 48084 Creditor's mailing address dlerner@plunkettcooney.com Creditor's email address, if known Date debt was incurred 2020- Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All Assets Describe the lien UCC Financing Statement- Line of Credit Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,109,418.81	\$5,000,000.00
2.2	Bank of America Creditor's Name 2600 West Big Beaver Rd Troy, MI 48084 Creditor's mailing address dlerner@plunkettcooney.com Creditor's email address, if known Date debt was incurred 2020- Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All Assets Describe the lien UCC Financing Statement- Term Loan Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$1,108,606.47	\$5,000,000.00

Debtor **TGM Coatings, LLC**

Name

Case number (if known)

22-00304☒ No☐ Contingent☐ Yes. Specify each creditor, including this creditor and its relative priority.☒ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$6,218,025.2**8****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

David A. Lerner, Esq.
Plunkett Cooney
38505 Woodward Ave
Suite 100
Bloomfield Hills, MI 48304Line **2.1**David A. Lerner, Esq.
Plunkett Cooney
38505 Woodward Ave
Suite 100
Bloomfield Hills, MI 48304Line **2.2**Kent County Circuit Court
Case No. 22-01336-CB
180 Ottawa NW
Grand Rapids, MI 49503Line **2.1**Kent County Circuit Court
Case No. 22-01336-CB
180 Ottawa NW
Grand Rapids, MI 49503Line **2.2**Peter D. Cronk, Esq.
Plunkett Cooney
101 N. Washington Square
Suite 1200
Lansing, MI 48933Line **2.1**Peter D. Cronk, Esq.
Plunkett Cooney
101 N. Washington Square
Suite 1200
Lansing, MI 48933Line **2.2**

Fill in this information to identify the case:

Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**
☒ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.
Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address Absopure Water Company PO Box 701760 Plymouth, MI 48170 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.88
3.2	Nonpriority creditor's name and mailing address Akzo Novel Coatings, Inc. 62166 Collection Center Dr. Chicago, IL 60693 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,818.12
3.3	Nonpriority creditor's name and mailing address Alt Oil Company, Inc. 1374 W. Randall Coopersville, MI 49404 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77.33
3.4	Nonpriority creditor's name and mailing address Arrowaste, Inc. PO Box 828 Jenison, MI 49429 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$769.03

Debtor **TGM Coatings, LLC**
NameCase number (if known) **22-00304**

3.5	Nonpriority creditor's name and mailing address Blastek, LLC PO Box 443 Middleville, MI 49333 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.6	Nonpriority creditor's name and mailing address Dematic Corp. 507 Plymouth Ave NE Grand Rapids, MI 49505 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.7	Nonpriority creditor's name and mailing address FedEX Bankruptcy Dept. 3965 Airways Blvd Module G- 3rd Floor Memphis, TN 38116 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
3.8	Nonpriority creditor's name and mailing address Grainger Dept. 803639590 Palatine, IL 60038 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$723.20
3.9	Nonpriority creditor's name and mailing address IFS Coatings PO Box 671639 Dallas, TX 75267 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Supplier</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,398.72
3.10	Nonpriority creditor's name and mailing address J&L Roofing 567 11th Street NE Grand Rapids, MI 49504 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.11	Nonpriority creditor's name and mailing address Liquid Industrial Waste 11325 E. Lakewood Blvd Holland, MI 49424 Date(s) debt was incurred <u>2021-</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$277.50

Debtor **TGM Coatings, LLC**
NameCase number (if known) **22-00304**

3.12	Nonpriority creditor's name and mailing address Maynard's Water Conditioning 9980 Cherry Valley Caledonia, MI 49316 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.00
3.13	Nonpriority creditor's name and mailing address Miller Industrial Gasses 505 Grandville Ave SW Grand Rapids, MI 49503 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$321.54
3.14	Nonpriority creditor's name and mailing address Model First Aid & Safety PO Box 8037 Grand Rapids, MI 49518 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$364.18
3.15	Nonpriority creditor's name and mailing address Painters Supply & Equipment PO Box 1477 Taylor, MI 48180 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$436.35
3.16	Nonpriority creditor's name and mailing address Protech Chemicals Ltd. PO Box 33212 Detroit, MI 48232 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.48
3.17	Nonpriority creditor's name and mailing address Purity Cylinder Gases, Inc. PO Box 9390 Wyoming, MI 49509 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$667.82
3.18	Nonpriority creditor's name and mailing address Rollie Williams Paint Spot 2570 Walker Ave, Suite A Grand Rapids, MI 49544 Date(s) debt was incurred 2021- Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$381.20

Debtor **TGM Coatings, LLC**
NameCase number (if known) **22-00304**

3.19	Nonpriority creditor's name and mailing address Royal Controls & Process Serv. 507 East Maple Street Fremont, MI 49412 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
3.20	Nonpriority creditor's name and mailing address Safety Kleen Systems 2600 North Central Expressway Suite 400 MT 59154 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$591.54
3.21	Nonpriority creditor's name and mailing address Seaver Industrial Furnishing 1645 Marion Street Grand Haven, MI 49417 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139.60
3.22	Nonpriority creditor's name and mailing address Smitter Pest Control 1650 Division Ave Grand Rapids, MI 49507 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$288.00
3.23	Nonpriority creditor's name and mailing address Spectrum Business PO Box 3019 Milwaukee, WI 53201 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$674.94
3.24	Nonpriority creditor's name and mailing address Uline PO Box 88741 Chicago, IL 60680 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$783.49
3.25	Nonpriority creditor's name and mailing address Vitan Equipment PO Box 77000 Dept. 771318 Detroit, MI 48277 Date(s) debt was incurred 2021- Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplier Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$727.09

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **TGM Coatings, LLC**
NameCase number (if known) **22-00304**

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 Stephen B. Grow, Esq. Warner Norcross & Judd LLP 150 Ottawa Ave NW Suite 150 Grand Rapids, MI 49503	Line 3.6 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****5a. Total claims from Part 1****5b. Total claims from Part 2****5c. Total of Parts 1 and 2**
Lines 5a + 5b = 5c.

Total of claim amounts	
5a. \$	0.00
5b. + \$	33,268.01
5c. \$	33,268.01

Fill in this information to identify the case:Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**

☐ Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

*Property***2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Commercial Lease-
1840 142nd Ave
Dorr, MI 49323**

State the term remaining

List the contract number of any government contract

**TG Industrial Land
Development, LLC
1530 Eastern Ave
Grand Rapids, MI 49507**

Fill in this information to identify the case:

Debtor name **TGM Coatings, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **22-00304**
☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1

Richard Achtenberg**1648 Casey Key
Punta Gorda, FL 33950****Bank of America**
☒ D **2.1**
☐ E/F
☐ G

2.2

Richard Achtenberg**1648 Casey Key
Punta Gorda, FL 33950****Bank of America**
☒ D **2.2**
☐ E/F
☐ G

2.3

TG Manufacturing, LLC**1530 Eastern Avenue
Grand Rapids, MI 49507****Bank of America**
☒ D **2.1**
☐ E/F
☐ G

2.4

TG Manufacturing, LLC**1530 Eastern Avenue
Grand Rapids, MI 49507****Bank of America**
☒ D **2.2**
☐ E/F
☐ G

2.5

TG Turnkey, LLC**739 Cottage Grove SE
Grand Rapids, MI 49507****Bank of America**
☒ D **2.1**
☐ E/F
☐ G

Debtor

TGM Coatings, LLC

Case number (if known)

22-00304

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: CodebtorColumn 2: Creditor

2.6	TG Turnkey, LLC	739 Cottage Grove SE Grand Rapids, MI 49507	Bank of America	<input checked="" type="checkbox"/> D	2.2
				<input type="checkbox"/> E/F	
				<input type="checkbox"/> G	